

Work Order ID **92084**

Tuesday, October 23, 2012 4:07:55 PM

92084

WLM SP Page 1

Item ID: PB67-43001-73

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Item Name: 20 Degree Cover Plate

Stop ***NS2***

Start Date: 10/23/2012 Start Qty: 10.00

10

Cust Item ID:

Required Date: 11/2/2012 Req'd Qty: 10.00

10

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 12-10-25

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start ***NR1***

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr
B67-43001-73	Rev C

100 0.00

100

FLOW WATER JET

Waterjet

Memo

0.00

FLOW CNC Waterjet

1-Cut as per Dwg B67-43001 Dwg Rev: C Prog Rev: C

6061.033

****grain direction along 6.950" ****2-Deburr if necessary

(12) 12-10-30

110 0.00

110

QC2- Inspect parts off machine FAI/FAIB

QC

Memo

0.00

Quality Control

(12) 12-10-30

120 0.00

120

QC8- Inspect parts - second check

QC

Memo

0.00

Quality Control

*DA's
15
121030*

12 12-10-30

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 92084

Tuesday, October 23, 2012 4:07:55 PM

92084

Page 2

Item ID: PB67-43001-73 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: Stop ***NS2***
 Item Name: 20 Degree Cover Plate
 Start Date: 10/23/2012 Start Qty: 10.00 ***10*** Cust Item ID:
 Required Date: 11/2/2012 Req'd Qty: 10.00 ***10*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
130	NC BRAKE					12			SP 12/11/07
Brake NC	Memo	0.00							
Brake NC	Bend as per Dwg B67-43001								
140		0.00							
140	QC5- Inspect part completeness to step on W/O					12			
QC	Memo	0.00							
Quality Control									
150		0.00							
150	Large Fab					12	0		12.11.08
Large Fab	Memo	0.00							
Large Fab	1- weld as per dwg B67-4300								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																								
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
Operator <input type="checkbox"/>																											
Material <input type="checkbox"/>																											
Setup <input type="checkbox"/>																											
Other <input type="checkbox"/>																											
Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											

FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Tuesday, October 23, 2012 4:07:55 PM

92084

Item ID: PB67-43001-73

Accept

N900040100

Setup Start *NS1*

Revision ID:

Item Name: 20 Degree Cover Plate

Stop *NS2*

Start Date: 10/23/2012 **Start Qty:** 10.00

10

Cust Item ID:

Required Date: 11/2/2012 **Req'd Qty:** 10.00

10

Customer:

Reference:

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

[illegible]

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY										
Landing Gear			General							
<input type="checkbox"/> Bending	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> Cracks	<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Wave/Twist in Tube
<input type="checkbox"/> Bend	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Burrs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Countersink	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Drawing	<input type="checkbox"/> Finish	<input type="checkbox"/> Folio
<input type="checkbox"/> Grain	<input type="checkbox"/> Hardware	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Misread	<input type="checkbox"/> Offset	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions
<input type="checkbox"/> Ovalized	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Part Moved	<input type="checkbox"/> Positioned Wrong	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced	<input type="checkbox"/> Temperature/Cure	<input type="checkbox"/> Weld	<input type="checkbox"/> Wrong Stock Pulled
							<input type="checkbox"/> Other			
<div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div> <div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div> <div style="border-bottom: 1px solid black; height: 15px; width: 100%;"></div>										

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 92084

92084

Page 5

Tuesday, October 23, 2012 4:07:55 PM

Item ID: PB67-43001-73 Accept *N9000040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: 20 Degree Cover Plate
 Start Date: 10/23/2012 Start Qty: 10.00 *10* Cust Item ID:
 Required Date: 11/2/2012 Req'd Qty: 10.00 *10* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
220		0.00							
220	PURCHASING								
Purchasing	Memo	0.00							
Purchasing	SEND TO TALMAR FOR FOAM AND FABRIC								
									CL 12/11/13 (12)
230		0.00							
230	Receive & Inspect for Damage & Mat'l Certs	0.00							
Packaging	Memo	0.00							
Packaging									
									4/2/12/5 (12)
240		0.00							
240	QC6- Inspect dimensions to drawing	0.00							
QC	Memo	0.00							
Quality Control									
									12

DAS
5
2-89

12/2/05

DAS
16
2-89

12/2/06

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																								
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
Operator <input type="checkbox"/>																											
Material <input type="checkbox"/>																											
Setup <input type="checkbox"/>																											
Other <input type="checkbox"/>																											
Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											
FAULT CATEGORY																											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other																		

Work Order ID 92084

92084

Page 6

Tuesday, October 23, 2012 4:07:55 PM

Item ID: PB67-43001-73 Accept *N900040100* Setup Start *NS1*
 Revision ID: Stop *NS2*
 Item Name: 20 Degree Cover Plate
 Start Date: 10/23/2012 Start Qty: 10.00 *10* Cust Item ID:
 Required Date: 11/2/2012 Req'd Qty: 10.00 *10* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
250	Identify as per dwg & Stock Location: <i>St</i>	0.00							
250									
Packaging	Memo	0.00							<i>Per dwg (12)</i>
Packaging									
260	QC21- Final Inspection - Work Order Release	0.00							
260									
QC	Memo	0.00							<i>12/12/10</i>
Quality Control									<i>ME</i>

12-12-07

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Skid-tube <input type="checkbox"/></td> <td style="width:33%;">Crosstube <input type="checkbox"/></td> <td style="width:33%;">Water Jet <input type="checkbox"/></td> <td style="width:33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																								
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data <input type="checkbox"/>																											
Equip/Tooling <input type="checkbox"/>																											
Operator <input type="checkbox"/>																											
Material <input type="checkbox"/>																											
Setup <input type="checkbox"/>																											
Other <input type="checkbox"/>																											
Process <input type="checkbox"/>																											
Supplier <input type="checkbox"/>																											
Training <input type="checkbox"/>																											
Unapproved <input type="checkbox"/>																											

FAULT CATEGORY				
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

Tuesday, October 23, 2012 4:07:55 PM

Page 1

Work Order ID: 92084

Parent Item: PB67-43001-73

Parent Item Name: 20 Degree Cover Plate

Start Date: 10/23/2012

Required Date: 11/2/2012

Start Qty: 10.00

Required Qty: 10.00

Comments: IPP Rev:A 08-06-19 new issue DD verified by:ec IPP rev B 10.09.30 per rev C
dwg EC verified by:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M6061T6S.032 6061-T6 Sheet 0.032"		Purchased	No			100	sf	733.2600	1.0183	10.718947	3	10-2-30	

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT021	733.26	
121099	85.97	
122256	40.89	
122737	30.1	
123097	91.1	
123135	62.5	
123137	342.8	
123293	79.9	

123293

⑫

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

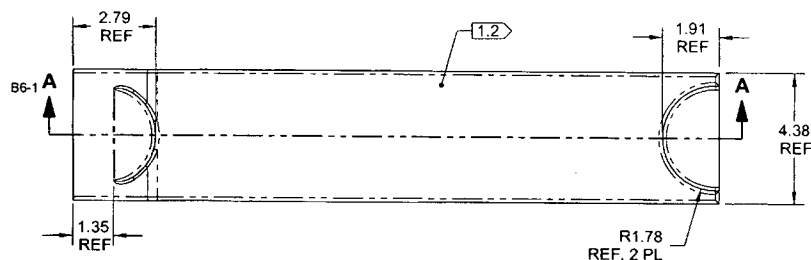
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

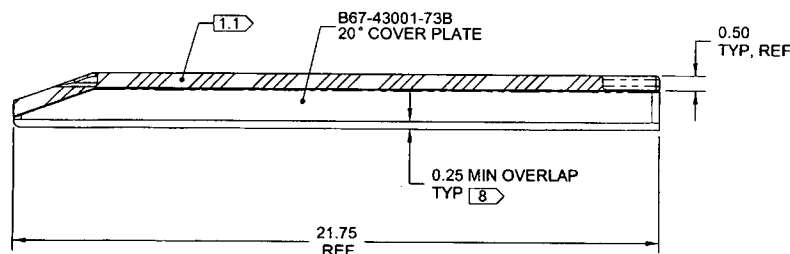
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
--	---	--

8 7 6 5 4 3 2 1

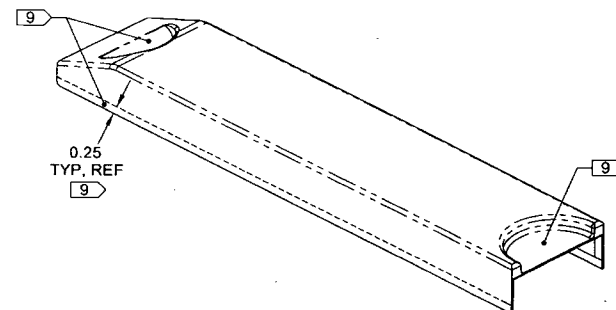
ITEM	QTY	P/N	DESCRIPTION
1	1	B67-43001-73	20° COVER PLATE
2	1	B67-43001-73B	20° COVER PLATE
3	A/R	1637-001	SEE NOTE 1.1
4	A/R	1495	SEE NOTE 1.2
5	A/R	LA4009	SEE NOTE 1.3



B67-43001-73 COVER PLATE ASSEMBLY
(MAKE FROM B67-43001-73F)



SECTION A-A D8-1



NOTES:

- 1) MATERIAL:
 - 1.1) FOAM: ETHYLENE PROPYLENE NEOPRENE SBR CLOSED-CELL, FLAME RETARDANT, 0.50 THICK, PER ASTM D1056 2A2, SERVICE TEMP -40°F TO +200°F, COLOUR: BLACK REF. TULMAR P/N 1637-001
 - 1.2) FABRIC: 100% 420 DENIER NYLON, MIN THREAD COUNT 35X35, POLYURETHANE COATED ONE SIDE, COLOUR: BLACK REF. TULMAR P/N 1495
 - 1.3) ADHESIVE: URETHANE WITH CATALYST, TWO PART, CLIFTON LA4009
- 2) FINISH: BOND NEOPRENE TO COVER PLATE USING ADHESIVE. COVER WITH DENIER AS SHOWN.
- 3) TOLERANCES: PER TABLE 1 (ZN A3-1) UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.77 lbs REF
- 8) DENIER NYLON TO BE BONDED ALL AROUND INNER SIDES OF PLATE
- 9) DENIER NYLON TO BE BONDED TO PLATE ON OUTER SIDES

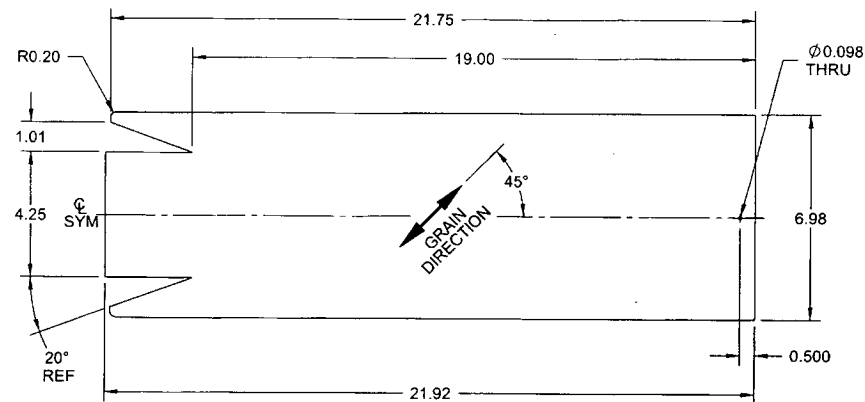
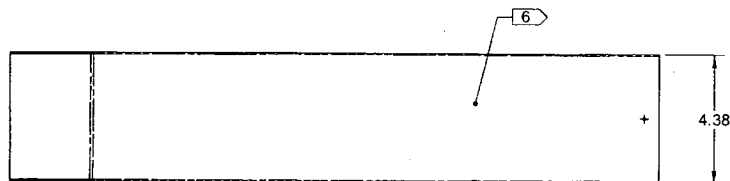
TABLE 1

TOLERANCES ON FABRIC (PARTS AND ASSEMBLIES)
±1/8: DIMS <2
±1/4: DIMS 2 TO <10
±1/2: DIMS 10 TO <20
±5/8: DIMS 20 TO <40
±1.5%: DIMS EQUAL TO OR > 40

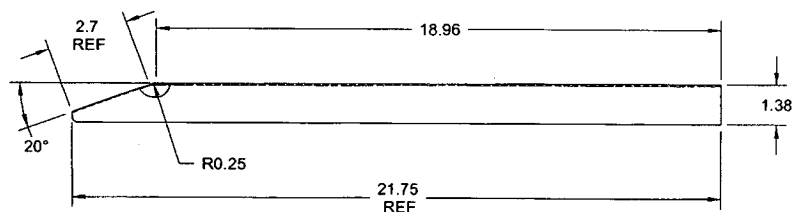
C	REDRAWN PREMIER AVIATION DRAWING IAW DART QSI 018, QSI 043 AND TULMAR SAFETY SYSTEMS INC.'S MANUFACTURING PROCESS AND TOLERANCES ON FABRIC. 4.38 WAS 4.25. FOR PREVIOUS REVISIONS, REFER TO SHEETS 7 AND 26 OF PREMIER AVIATION DRAWING No. B67-43001. REASON: SEE PAR#09-011.		MB	10.04.27
REV.	DESCRIPTION		BY	DATE
DESIGN	RW	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA		
DRAWN				
CHECKED		DRAWING NO.	REV. C	
MFG. APPR.		B67-43001-73	SHEET 1 OF 2	
APPROVED		TITLE	SCALE	
DE APPR.	N/A	20° COVER PLATE	NTS	
DATE	10.04.27	COPYRIGHT © 1995 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD		

8 7 6 5 4 3 2 1

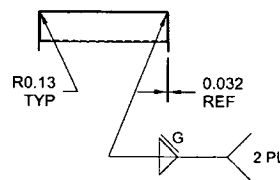
92084



B67-43001-73F COVER PLATE FLAT PATTERN







B67-43001-73B BENDING DETAIL
(MAKE FROM B67-43001-73F)

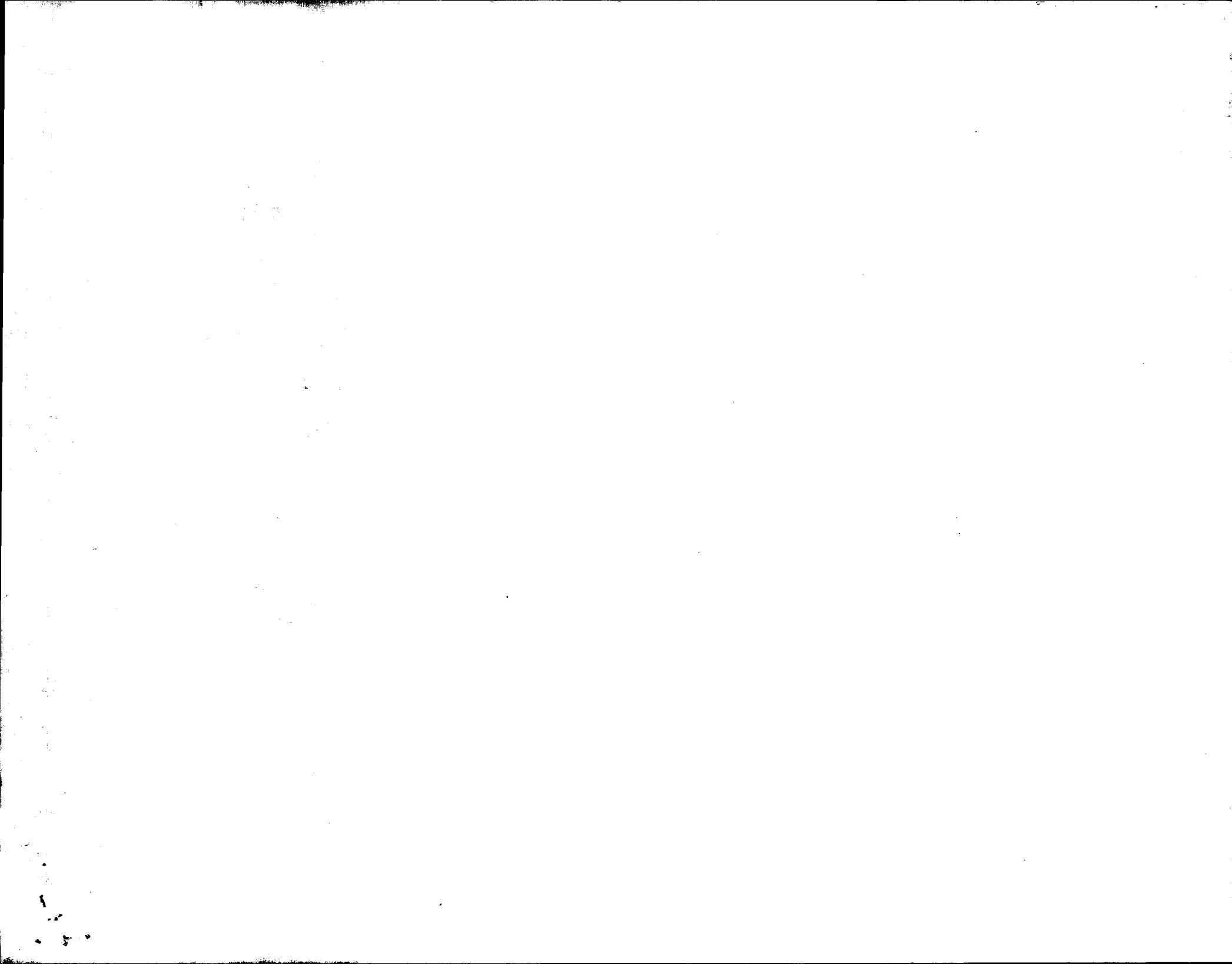


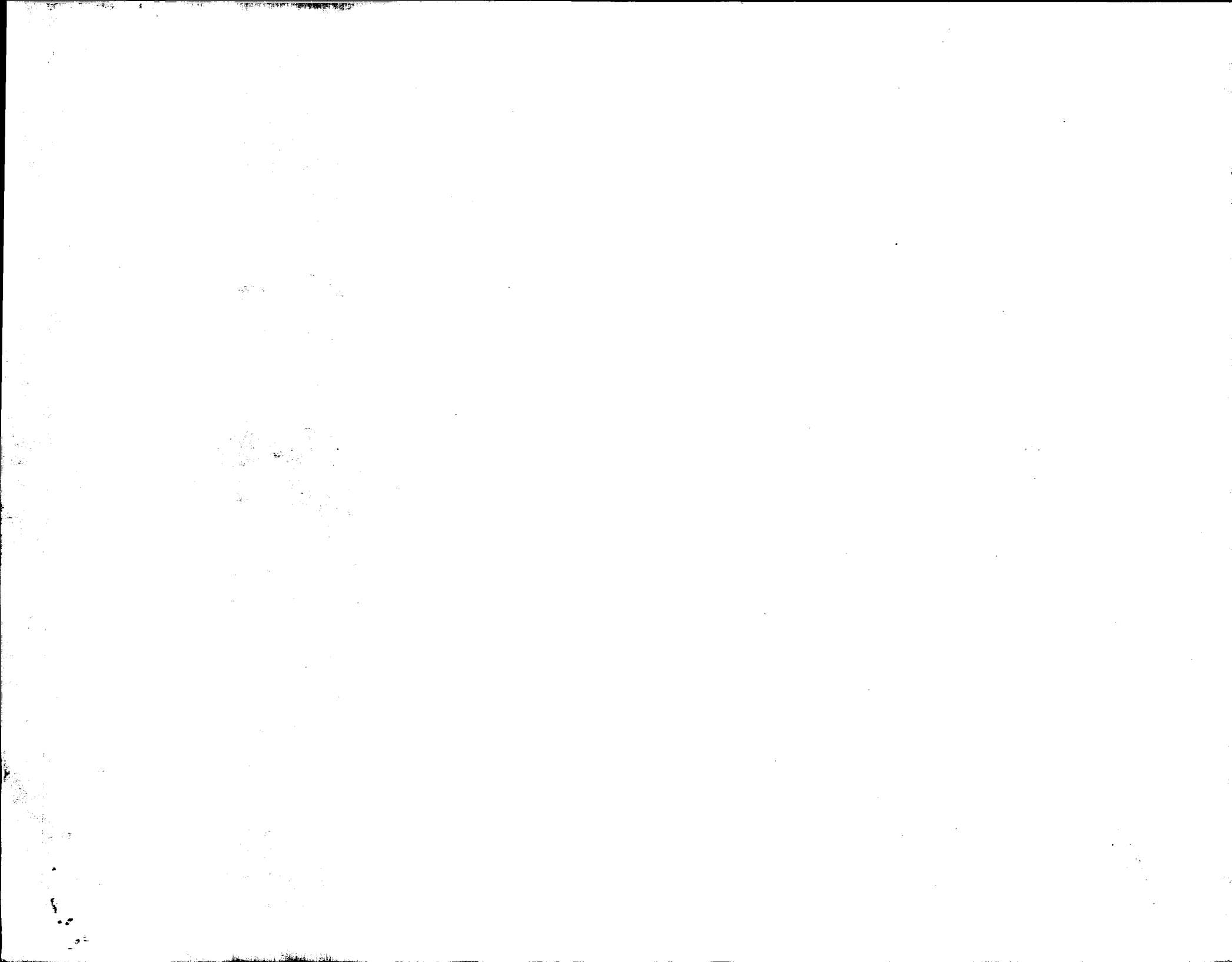
RELEASED
2010-09-16
MP

NOTES:

- 1) MATERIAL: 6061-T6 (OR 6061-T62) ALUMINUM SHEET, 0.032 THICK
PER AMS-QQ-A-250/11 OR AMS 4025/4027 OR ASTM B209
REF: DART SPEC. M6061T6S.032
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1
POWDER COAT GREEN SANDTEX (4.3.5.8) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "B67-43001-73B" USING FINE POINT PERMANENT INK MARKER
- 7) WEIGHT: 0.47 lbs

DESIGN	R/W	DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. C
MFG. APPR.		B67-43001-73	SHEET 2 OF 2
APPROVED		TITLE	SCALE
DE APPR.	N/A	20° COVER PLATE	NTS
DATE	10.04.27	COPYRIGHT © 1995 BY DART AEROSPACE LTD	
THIS DOCUMENT IS PROPRIETARY AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.			







Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO18393**

Purchase Order Date 11/13/12

PO Print Date 11/13/12

Page Number 1 of 2

Order From :

VC-TUL001

TULMAR SAFETY SYSTEMS
1123 CAMERON ST
HAWKESBURY, ON K6A 2B8
CA

Contact Name

Vendor Phone

Vendor Fax

Vendor Account Nbr

613 632 1282

613 632 2030

Buyer

Requisition Nbr

Tax Resale Nbr

Terms

Currency

FOB

Chantal Lavoie

10127-2607

Net 30

CAD

Destination-Collect

Ship To :

DART AEROSPACE LTD 1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAKED
COPIES

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	92087	PB67-43001-69 90 DEG. COVER PLATE	11/30/12 Yes	12.00	Dart Truck	\$150.0000	\$1,800.00
2	92084	Special Inst: FOAM AND FABRIC AS PER DWG.PB67-43001-69 PB67-43001-73 20 DEG. COVER PLATE	11/30/12 Yes	12.00	Dart Truck	\$130.0000	\$1,560.00
3	90819	Special Inst: FOAM AND FABRIC AS PER DWG.PB67-43001-73 PB67-43001-83 D-PAD ASSEMBLY	11/30/12 Yes	25.00	Dart Truck	\$50.0000	\$1,250.00
		Special Inst: FOAM AND FABRIC AS PER DWG.PB67-43001-83					

Change Nbr:

1

Change Date: 11/13/12

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required **YES** NO



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1953

PURCHASE ORDER

Purchase Order ID **PO18393**

Purchase Order Date 11/13/12

PO Print Date 11/13/12

Page Number 2 of 2

Order From :

VC-TUL001

TULMAR SAFETY SYSTEMS
1123 CAMERON ST
HAWKESBURY, ON K6A 2B8
CA

Contact Name

Vendor Phone

Vendor Fax

Vendor Account Nbr

613 632 1282

613 632 2030

Buyer

Requisition Nbr

Tax Resale Nbr

Terms

Currency

FOB

Chantal Lavoie

10127-2607

Net 30

CAD

Destination-Collect

4	90818	PB67-43001-85 D-PAD ASSEMBLY LONG	11/30/12	13.00	Dart Truck	\$50.0000	\$650.00
---	-------	--------------------------------------	----------	-------	------------	-----------	----------

Yes

Special Inst: FOAM AND FABRIC AS PER DWG.PB67-
43001-85

PO Total:

\$5,260.00

CERTIFICATE OF CONFORMITY
REQ'D UPON DELIVERY

MATERIAL CERTIFICATION
REQ'D UPON DELIVERY

Change Nbr:

1

Change Date: 11/13/12

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required **YES** NO

PACKING SLIP

TULMAR

Tulmar Safety Systems Inc.
1123 Cameron Street
Hawkesbury, ON K6A 2B8 CA
Tel: 613-632-1282
Fax: 613-632-2030
MID : XOTULSAF1123HAW
email: info@tulmar.com

Packing Slip No.

46104

Ship Date

3-Dec-12

Bill To:

Dart Aerospace
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7. Canada

Ship to:

Dart Aerospace
1270 Aberdeen Street
Call: Chantal Lavoie
Tel: 613-632-9577
Hawkesbury, ON K6A 1K7. Canada

Order number	Sales order date	Account number	Account manager
29528	14-Nov-12	CDART100	Helena Vandeweerd
PO number	Ship Via	Shipping Terms	
PO18393	Pick-Up	FOB HAWKESBURY	
Item No.	Quantity ordered	UOM	Qty Shipped/Returned
Description			Quantity on back order

8421-105

Cover Plate, 20%

Drawing No: B67-43001-73

DWG Rev: C

Line 2

Lot No: BATCH0000000006 Qty: 12

8421-101

D-Pad Assembly, Short/

Drawing No: B67-43001-83

DWG Rev: C

Line 3

Lot No: BATCH0000000009 Qty: 25

8421-102

D-Pad Assembly, Long/

Drawing No: B67-43001-85

DWG Rev: C

Line 4

Lot No: BATCH0000000007 Qty: 13

Shipper

Date:

DEC 03 2012

Certificate of Conformance

☒ See Certification Enclosed

I hereby certify that the items listed hereon have been inspected, and / or tested (as applicable), conform to all specifications and requirements detailed in the contract or purchase order. Objective evidence to support this statement is on file, and can be made available upon request.
If any questions or concerns, please contact QA Manager @ 613-632-1282 ext. 245.

Authorized Inspector

Date:

Roxanne Lavoie

DEC 03 2012

AUG. 31. 2012 12:09PM

J ENNIS FABRICS LTD

NO. 915 P. 1



J. ENNIS FABRICS LTD.

Wholesale Distributor of Textiles and Supplies

August 31, 2012

Fax To: Tulmar Safety Systems

Fax: 613-632-2030

Attention: Meagan

EDMONTON
HEAD OFFICE
12122 - 68 Street
Edmonton, AB T5B 1R1
Canada
Phone: (780) 474-5721

TORONTO
6300 Kenway Drive
Mississauga, ON L5T 2N3
Canada

CALGARY
2nd Floor, 337 - 17 Avenue SW
Calgary, AB T2S 0A5
Canada

VANCOUVER
13911 Bridgeport Road
Richmond, BC V6V 1J6
Canada

MONTREAL
9280 boulevard du Golf
Anjou, QC H1J 3A1
Canada

Certificate of Conformance

Re: PO# 23876-00 for Oxford 7 Black

The goods shipped on P/O 23876-00 are as per sampled goods. Specification as follows:
As per mill documentation:

Oxford 7 Black is in compliance with the following standards:

Width: Product is 58 Inches Wide.

Roll Size: Average Roll Length is 76 Yards.

Weight: Product Weight is 6.79 Ounces per Sq.Yd. /Product Weight is 10.94 oz per Lin.Yd

Content: 100% Nylon

Coating: Product has a Polyurethane Coating (approximately 0.65 oz/ Sq.Yd. (18.5g/sq.yd.))

Denier: Yarn is 420 Denier. *Sm 12 12 02*

Thread Count: Construction is 62 x 38 Threads per Square Inch

Protective Finish: Product is Water Repellent.

Hydro Resist: AATCC 127 (Suter): Average 800 mm

Piece # 107904351 Manufacture Date: 07/20/12, Lot Number: 412019

Sincerely,
J. Ennis Fabrics Ltd.

C. Harris

Crystal Harris
Customer Service Center Team Lead/Supervisor

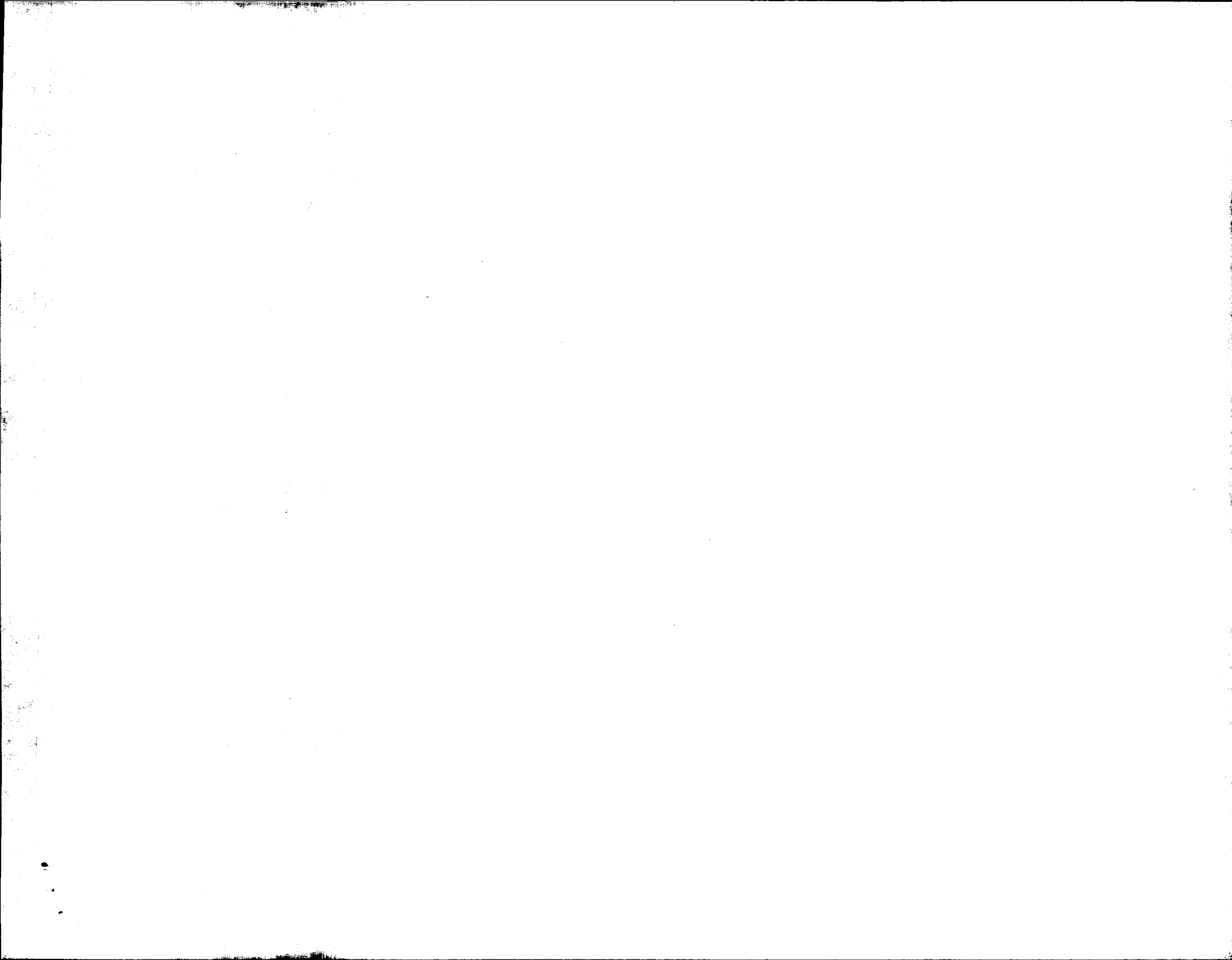
English: 1-800-66-ENNIS

Fax: (780) 479-6135
www.jennisfabrics.com

Français: 1-888-66-ENNIS

c/c's used to mfg.
B67-43001-(73) (3 pages) Sh.

TSS 1495 / B# 25 (Sm)



E.F. Walter Inc.	CERTIFICAT DE CONFORMITÉ CERTIFICATE OF COMPLIANCE		Approved <u>JR</u> Date <u>1/3/02</u>
Revision #0	Revision date: January 30, 2002	Doc # F.7.5.5.A	Page 1 of 1

Date : 09/09/2008VENDU À
SOLD TO6048TULMAR SAFETY SYSTEMS INC.1123 CAMERON STREETHAWKESBURY ONTK6A 2B8FOURNISSEUR
VENDORE.F. WALTER INC.180 BARTOR ROADTORONTO, ONTARIOM9M 2W6Commande / Order # 14649-00Notre / Our Reference # 55968

Nous certifions par la présente que la totalité du matériel inscrit ci-dessous a été inspecté et vérifié et est conforme aux devis et aux normes mentionnés sur votre commande.

We hereby certify that all of the material listed below has been inspected and tested and conforms to the drawings and / or specifications stated on your purchase order.

Item	Quantité Quantity	Pièce # Part #	Description
742050005	8.000 PCS	# 1637-001	SPONGE NEOPRENE BLACK SC42 TRIMMED NO SKIN (1/2" x 54" x 72") ASTM D1056, 2A2
		<i>SMD P.R.O.S</i>	
			LOT # 75570 MANUFACTURING DATE: Sept. 5, 2008

Signé
Signed09/09/2008TSS # 1637-001/02

FAXED
FEB 22

CLIFTON

Adhesive, Inc

Industrial Adhesives & Coatings

A Division of Royal Adhesives and Sealants

Date: 9/7/12

LA4009

Shipper #: 21841

Certificate of Compliance

This letter certifies that 44 x 5 gallon pails of LA4009 Polyurethane Adhesive,
lot number (s) 12-236 was shipped to you on 9/7/12. ****Drawing No: (Ref 10557979)**
****DWG REV: "A"**

Clifton Adhesive, Inc manufactured this material according to internal specifications
which include quality control and assurance procedures. The material was

manufactured on 8/23/12 against your Purchase Order # 23716-00.

Shelf Life: 1 year from date of manufacture

Expiration Date: 8/23/13

SMB
J R OS

This letter certifies that 34 x quart cans of CATUV Accelerator,

Lot number 12-229 was shipped to you on 9/7/12.

Clifton Adhesive, Inc manufactured this material according to internal specifications
which include quality control and assurance procedures. The material was

manufactured on 8/16/12 against your Purchase Order # 23716-00.

Shelf Life: 1 year from date of manufacture

Expiration Date: 8/16/13

Sincerely,

Dan Constantino

Daniel Constantino
Quality Assurance Mgr/ISO Coordinator

48 Burgess Place • Wayne, NJ 07470 USA
Phone: 973-694-0845 • Fax: 973-694-5678
www.cliftonadhesive.com

TSS 7122/54. (S)